## **PCMDI** Foreign Travel Request Form

Name:	Extension:			
Reservation to be made	le by (select one):	Traveler	Secretary	
Acct. No. (select one) *Details of funding (if		lost to fund and travel)	*Other	0589-01 NGI
Please list the DOE HQ cor	itact and phone number f	or this trip (must	have both name	& number)
Name	Telep	phone Number		
Destination (City/Cou	nrty)			
If sensitive country, s	state your clearence	e level		
Registration Fee	Estimated Total Cost			
Departure Date	Return Da	ate		
Passport No.	E	xpiration Dat	e	
Hotel (include city/state)	if different from above	)		
Telephone	Fax			
Transportation				
to Airport:				
from Airport:				
in Business Area:				
Vacation Dates	Business Da	ites		
Name of Contact	Phone No.			
<b>Affiliated Institution</b>				

Are you Presenting a paper Yes No	
Please list the UCRL# if you are presenting a paper.	
Purpose/Details(full name of the conference, your purpose for attending. If an invitation or e-mail was received, please submit a copy to Kim.)	
Benefit to the Government/PCMDI/LLNL and DOE(need a detailed paragraph)	
Other Meetings (other meetings to attend while in the area, include contact person & phone number)	
Names of others traveling with you (names & organization if traveling as a team)	
Overnight Stops(each overnight stop must be listed as Official Stopover, Business, or Personal)	
Notes: Foreign travel, unlike domestic travel, must be described in detail. You must fill out each entry otherwise it could delay processing your trip. Paperwork has to be submitted to the Foreign Travel Office 40 days prior to departure date. Otherwise, you have to prepare a statement to be included in this paperwork stating why the trip request is submitted late.  Please try to be as accurate as possible with your trip details, otherwise changes have to be resubmitted and approved by DOE which delays the final trip approval.	
PCMDI ApprovalDate	